DT05 Rec'd PCT/PTO 0 3 FEB 2005

Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type::

Subject Matter::

Utility

Regular

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: MEDICAL TREATMENT SYSTEM BY

SUBSTITUTING NATIVE BIOLOGICAL

REGULATORY FUNCTION; CARDIAC PACING

SYSTEM, BLOOD PRESSURE REGULATING

SYSTEM, AND CARDIAC DISEASE TREATMENT SYSTEM BASED ON THE

MEDICAL TREATMENT SYSTEM

Attorney Docket Number:: KUP-5

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 8

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::			
Contract or Grant	Numbers::		
Secrecy Order in Parent Appl.?::		No	
Correspondence In	formation		
Correspondence Customer Number::		020808	
Phone Number::		607-256-2000	
Fax Number::		607-256-3628	
E-Mail address::		docket@bpmlegal.com	
Representative In	formation		
Representative Customer Number:: 020808			
Domestic Priority	Information		
Application::	Continuity Type::	Parent Application::	Parent Filing Date:
(11		
Foreign Priority	Information		
Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Japan as Represented by President

of National Cardiovascular Center

Street of mailing address:: 7-1, Fujishirodai 5-chome,

Suita-shi

City of mailing address:: Osaka

State or Province of mailing

address::

Country of mailing address:: JAPAN

Postal or Zip Code of mailing

address:: 565-8565

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Kenji

Middle Name::

Family Name:: Sunagawa

Name Suffix::

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Country of Residence:: Japan

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Address::

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Address:: 819-0373

Applicant Information

Applicant Authority Type:: Inventor

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Middle Name::

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Applicant Information

Applicant Authority Type:: Inventor

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Family Name:: Sato

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State or Province of Residence::

Country of Residence:: Japan

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Okou-cho, Nangoku-shi

City of mailing address:: Kochi

State or Province of mailing

Address::

Country of mailing address:: Japan

Postal or Zip Code of mailing

Address:: 783-0042